

# Insulin Access for Africa: Cape Town Declaration of Action 2016

Hellen Gelband, Molly Miller-Petrie, Suraj Pant, Sumanth Gandra, Jordan Levinson, Devra Barter, Andrea White, Ramanan Laxminarayan  
Contributors: NK Ganguly for the GARP-India Working Group, Samuel Kariuki, Linus Ndegwa, and Eveline Wesangula for the GARP-Kenya Working Group, Betuel Sigaúque and Esperança Sevene for the GARP- Mozambique Working Group, Buddha Basnyat, Paras Pokharel, Sameer Mani Dixit, and Santoshi Giri for the GARP-Nepal Working Group, Adriano Duse, Olga Perovic, and Kim Faure for the GARP-South Africa Working Group, Said Aboud, Robinson Mdegela, and Khadija Msami for the GARP-Tanzania Working Group, Denis K. Byarugaba, Donna A. Kusemererwa, and James Lakony for the GARP-Uganda Working Group, Nguyen Van Kinh, Heiman Wertheim, and Do Thuy Nga for the GARP-Vietnam Working Group

© Medpharm

Wound Healing Southern Africa 2016;9(1):54-55

## #insulin4all

People with diabetes are dying in Africa because they cannot afford or access insulin. This is despite nearly 100 years having passed since the discovery of insulin by University of Toronto researchers, who all wished for universal access.<sup>1</sup> Most Africans also do not have the medical supplies, education and monitoring needed to use this life saving medication.

One in two people who need insulin cannot afford it.<sup>2</sup> Over the next decade, many of the over 22 million Africans living with diabetes today will die predictable and avoidable deaths without insulin treatment.<sup>3</sup>

We, the combined voices of Santé Diabète, T1International, WoundPedia, the International Interprofessional Wound Care Course, the delegates of the World Council of Enterostomal Therapy, the Wound Healing Association of Southern Africa, the Pan-African Diabetic Foot Study Group, and the International Interprofessional Wound Care Group gathered together in Cape Town South Africa and resolved that we cannot accept that diabetes has now surpassed malaria, tuberculous and HIV/AIDS as a leading cause of adult death in Africa.<sup>4</sup>

**We want everyone with diabetes in Africa to have access to affordable insulin and injection devices.**

## We demand #insulin4all.<sup>5</sup>

We call for the World Health Organisation to announce a goal of universal access to insulin treatment. We launch this plea in the same spirit as the 2002 Cape Town Declaration of Action for HIV/AIDS access that has saved millions of lives.<sup>6</sup> Our task force and international allies will hold governments, international agencies, donors, the pharmaceutical industry and the private sector accountable for universal access to insulin in Africa.

This is an immense challenge with millions of lives at stake. This is an achievable goal. We call for everyone to endorse this declaration.

## References

1. Rosenfeld L. Insulin: discovery and controversy. Clin Chem. 2002. [www.clinchem.org/content/48/12/2270.full](http://www.clinchem.org/content/48/12/2270.full)
2. Beran D, Ewen M, Laing R. Constraints and challenges in access to insulin: a global perspective. Lancet Diabetes Endocrinol. 2016;4(3):275-85.
3. International Diabetes Federation, World Diabetes Atlas, 7th Ed. 2015. [www.diabetesatlas.org](http://www.diabetesatlas.org)
4. Besançon S, Doré. M, Salignon .P In Africa, diabetes and cardiovascular diseases kill more than AIDS. Time to take action. 2016. Ideas for development the official blog of the French Development Agency. <http://ideas4development.org/en/in-africa-diabetes-and-cardiovascular-diseases-kill-more-than-aids-time-to-take-action/>
5. T1International. #Insulin4all. [www.t1international.com](http://www.t1international.com)
6. Treatment Action Collation. Pan-Africa HIV/AIDS Treatment Access Movement: Declaration of Action. 2002. [www.tac.org.za/community/node/2480](http://www.tac.org.za/community/node/2480)

# Insulin Access for Africa: Cape Town Declaration of Action 2016

## #insulin4all

People with diabetes are dying in Africa because they cannot afford or access insulin. This is despite nearly 100 years having passed since the discovery of insulin by University of Toronto researchers, who all wished for universal access.<sup>1</sup> Most Africans also do not have the medical supplies, education and monitoring needed to use this life saving medication.



One in two people who need insulin cannot afford it.<sup>2</sup> Over the next decade, many of the over 22 million Africans living with diabetes today will die predictable and avoidable deaths without insulin treatment.<sup>3</sup>



We, the combined voices of WoundPedia, International Interprofessional Wound Care Course, World Council of Enterostomal Therapists, the Pan-African Diabetic Foot Study Group, Santé Diabète, T1International, Wound Healing Association of Southern Africa, and the International Interprofessional Wound Care Group gathered together in Cape Town, South Africa and resolved that we cannot accept that diabetes has now surpassed malaria, tuberculosis and HIV/AIDS as a leading cause of adult death in Africa.<sup>4</sup>



We want everyone with diabetes in Africa to have access to affordable insulin and injection devices.

### We demand #insulin4all.<sup>5</sup>



We call for the World Health Organisation to announce a goal of universal access to insulin treatment. We launch this plea in the same spirit as the 2002 Cape Town Declaration of Action for HIV/AIDS access that has saved millions of lives.<sup>6</sup> Our task force and international allies will hold governments, international agencies, donors, the pharmaceutical industry and the private sector accountable for universal access to insulin in Africa.



This is an immense challenge with millions of lives at stake. This is an achievable goal. We call for everyone to endorse this declaration.

1 Rosenfeld L. Insulin: discovery and controversy. Clin Chem. 2002. [www.clinchem.org/content/48/12/2270.full](http://www.clinchem.org/content/48/12/2270.full)

2 Beran D, Ewen M, Laing R. Constraints and challenges in access to insulin: a global perspective. Lancet Diabetes Endocrinol. 2016;4(3):275-85.

3 International Diabetes Federation, World Diabetes Atlas, 7<sup>th</sup> Ed. 2015. [www.diabetesatlas.org](http://www.diabetesatlas.org)

4 Besançon S, Doré M, Salignon P. In Africa, diabetes and cardiovascular diseases kill more than AIDS. Time to take action, 2016. Ideas for development the official blog of the French Development Agency. <http://ideas4development.org/en/in-africa-diabetes-and-cardiovascular-diseases-kill-more-than-aids-time-to-take-action/>

5 T1International. #insulin4all. [www.t1international.com](http://www.t1international.com)

6 Treatment Action Collation. Pan-Africa HIV/AIDS Treatment Access Movement: Declaration of Action. 2002. [www.tac.org.za/community/node/2480](http://www.tac.org.za/community/node/2480)